

POSITION	ID NO.	DATE
CLASSIFIER	12	2/1/94
EXAMINER	43m	2/24/94
TYPIST	335	2/20/94
VERIFIER	10310	4/20/94
CORPS CORR.		
SPEC. HAND	100 437	4-13-94
FILE MAINT.	10	2-25-94
DRAFTING		

### INDEX OF CLAIMS

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

SYMBOLS

✓ Rejected

• Allowed

• (Through numerical) Canceled

W Restricted

I Non-elected

A Interference

O Appeal

0 Objected

Claim	Date
Final Original	
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
59	✓
60	✓
61	✓
62	✓
63	✓
64	✓
65	✓
66	✓
67	✓
68	✓
69	✓
70	✓
71	✓
72	✓
73	✓
74	✓
75	✓
76	✓
77	✓
78	✓
79	✓
80	✓
81	✓
82	✓
83	✓
84	✓
85	✓
86	✓
87	✓
88	✓
89	✓
90	✓
91	✓
92	✓
93	✓
94	✓
95	✓
96	✓
97	✓
98	✓
99	✓
100	✓

(LEFT INSIDE)